

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. <b>10/031414</b>	FILING DATE				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/		/		/		51				
2	/		/		/		52				
3	/		/		/		53				
4	/		/		/		54				
5	/		/		/		55				
6		①	/	/	/		56				
7			/	/	/		57				
8			/	/	/		58				
9			/	/	/		59				
10			/	/	/		60				
11			/	/	/		61				
12			/	/	/		62				
13			/	/	/		63				
14			/	/	/		64				
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16			/	/	/		66				
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47							97				
48							98				
49							99				
50							100				
TOTAL IND.	5	↓	6	↓	5	↓	TOTAL IND.		↓		↓
TOTAL DEP.	1	↓	14	↓	13	↓	TOTAL DEP.		↓		↓
TOTAL CLAIMS	6		20		18		TOTAL CLAIMS				

PTO-1360 (2-76)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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